

TOWN OF FOWLER
Complaint Form

Property Owner (if known): _____

Address: _____

Person Filing Complaint: _____

Address: _____ Home phone # _____

Nature of Complaint: _____

Signature of person making complaint: _____

Date: _____

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Follow Up/Investigation

Findings: _____

Date: _____ Signature of Investigator: _____

Was Written Notice Given: _____ Comments: _____

Was Condition Corrected: _____ Comments: _____

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